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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
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# TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallabassee, FL 32314

SUBJECT:	SamAllT Corp.		
	(PROPOSED CORPORA) FEDERAL ID # 75	TE NAME - <u>MUST INCL</u> - 315 309	UDESUFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	a check for:
☐ \$70.00 Filing Fee	·	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PY REQUIRED
FROM:	Samuel J. Beasley Name	(Printed or typed)	
	9420 Cty Rd. 417	Address	
	Live Oak, Fl. 3200	60 State & Zip	
	386-364-4754	elephone number	
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NOTE: Please provide the original and one copy of the articles.

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

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### ARTICLE I NAME

The name of the corporation shall be:

SamAll T Corp

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

9420 CR 417 Live Oak, Fl. 32060

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Non-Emergency Transporting

### ARTICLE IV SHARES

The number of shares of stock is:

100

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Samuel J. Beasley President and Treasurer Mary E. Allen-Beasley Vice President and Secretary

### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Samuel J. Beasley 9420 Cty Rd. 417 Live Oak, Fl. 32060

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Samuel J. Beasley 9420 Cty Rd. 417 Live Oak, Fl. 32060

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

4-27-04